



State of Connecticut  
Department of Public Safety  
Division of State Police

DPS-90-C (Rev. 04/03) ☐ ADDITIONAL PAGES

<b>TROOP / UNIT:</b> Troop-E		<b>OTHER INVOLVED AGENCY:</b> <input type="checkbox"/> NO <input type="checkbox"/> YES	
<b>DATE:</b> 9/23/05	<b>TIME:</b> 1212	<b>INVESTIGATING TROOPER / OFFICER:</b> TFC O'Donnell #1136	<b>DPS CASE NUMBER:</b> DPS05-046594
<b>LOCATION OF INCIDENT (STREET NAME AND CITY/TOWN ONLY):</b> Groton/New London airport, Groton .CT			
<b>SUMMARY OF INCIDENT OR AFFIDAVIT:</b> <input type="checkbox"/> ARREST MADE <input type="checkbox"/> UNDER INVESTIGATION Accused in terminal of airport acting suspicious. Employees questioned subject, who became uncooperative, he Then stepped away from the counter and stated "that if anyone came near him he would blow them up". Police were contacted and upon arrival the accused remained uncooperative and then engaged police in an altercation Before he was taken into custody.			
<b>VICTIM: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD &amp; "AGE" IN DOB FIELD)</b>			
<b>NAME / BUSINESS / AGENCY:</b> <input type="checkbox"/> M <input type="checkbox"/> F Groton /NL airport		<b>ADDRESS: (TOWN/CITY&amp;STATE ONLY)</b>	
<b>NAME / BUSINESS / AGENCY:</b> <input type="checkbox"/> M <input type="checkbox"/> F		<b>ADDRESS: (TOWN/CITY&amp;STATE ONLY)</b>	
<b>NAME / BUSINESS / AGENCY:</b> <input type="checkbox"/> M <input type="checkbox"/> F		<b>ADDRESS: (TOWN/CITY&amp;STATE ONLY)</b>	
<b>NAME:</b> <input checked="" type="checkbox"/> M <input type="checkbox"/> F Robert Arthur JR		<b>DOB:</b> 6/28/42	<b>ADDRESS:</b> 8 Caribou Dr. Norwich. CT
<b>CHARGES:</b> 1. <i>threatening / etc.</i> 2. asslt on peace officer 3. breach of peace 4.		<b>COURT:</b> GA: 10  TOWN: New London  DATE: 9/26/05	<b>BOND:</b> <input checked="" type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: 10,000 <input checked="" type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:
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<b>CHARGES:</b> 1. 2. 3. 4.		<b>COURT:</b> GA:  TOWN:  DATE:	<b>BOND:</b> <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:
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